PART B - FEE(S) TRANSMITTAL and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUL FEE Commissioner for Patents P.O. Box 1450 JUN 0 9 2008 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885 form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated and the current correspondence address as indicated and the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fees will be mailed to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fees will be mailed to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fees will be mailed to the current correspondence address as Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) have its own certificate of mailing or transmission. 05/08/2008 23353 7590 Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. RADER FISHMAN & GRAUER PLLC LION BUILDING 1233 20TH STREET N.W., SUITE 501 WASHINGTON, DC 20036 (Depositor's name) (Signature) (Date) CONFIRMATION NO. ATTORNEY DOCKET NO. APPLICATION NO. **FILING DATE** FIRST NAMED INVENTOR 12/15/2003 SON-1697/DIV 4716 10/734,300 Yoshiharu Nakajima TITLE OF INVENTION: DIGITAL/ANALOG CONVERTER CIRCUIT, LEVEL SHIFT CIRCUIT, SHIFT REGISTER UTILIZING LEVEL SHIFT CIRCUIT, SAMPLING LATCH CIRCUIT, LATCH CIRCUIT AND LIQUID CRYSTAL DISPLAY DEVICE INCORPORATING THE SAME PREV. PAID ISSUE FEE TOTAL FEE(S) DUE **DATE DUE PUBLICATION FEE DUE** APPLN. TYPE SMALL ENTITY **ISSUE FEE DUE** \$0 86/10/2008 AWONDAF2 80080029 180013 nonprovisional \$300 NO \$1440 **EXAMINER ART UNIT CLASS-SUBCLASS** 1440.00 DA 01 FC:1501 02 FC:1504 300.00 DA DHARIA, PRABODH M 2629 345-204000 9 AA DA 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list Rader Fishman & Graver PLLC (1) the names of up to 3 registered patent attorneys L Change of correspondence address (or Change of Correspondence or agents OR, alternatively, 2 Ronald P. Kananen Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer listed, no name will be printed. Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE JAPAN SUNY CORPORATION Individual Corporation or other private group entity Government Please check the appropriate assignee category or categories (will not be printed on the patent): 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) 4a. The following fee(s) are submitted: Issue Fee ☐ A check is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 10-1113 (enclose an extra copy of this for 🚨 Advance Order - # of Copies __ (enclose an extra copy of this form). 5. Change in Entity Status (from status indicated above) □ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Updata States Patent and Trademark Office. Authorized Signature Typed or printed name _ Christopher M. Tokin Registration No.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)						Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
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Address form PTO/SB/1: "Fee Address" indicates	(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to									
PTO/SB/47; Rev 03-02 (Number is required.	2 registered paten listed, no name wi	2 registered patent attorneys or agents. If no name is 3 listed, no name will be printed.								
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)										
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(A) NAME OF ASSIGN	EE .			(B) RESIDENCE: (CITY	and STATE OR COUN	TRY)			
SONY CORPORATION JAPAN										
Please check the appropriate assignee category or categories (will not be printed on the patent):										
4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)										
Issue Fee A check is enclo						d Form PTO-2038 is at	tached			
						lit card. Form PTO-2038 is attached. lereby authorized to charge the required fee(s), any deficiency, or credit any Deposit Account Number 10-1113 (enclose an extra copy of this form).				
5. Change in Entity Status	(from status indicated	above)	overpayment, to	Depo	sit Account Number		(chelose al	rexua copy of this form).	
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NOTE: The Issue Fee and P interest as shown by the reco	ublication Fee (if requords of the Upward Sta	ired) v es Pate	vill not be accepted ent and Trademark	d from anyone other to Office.	han t	he applicant; a registered	l attorney	or agent; or th	e assignee or other party it	
Authorized Signature										
Typed or printed name Christopher M. Tokin						Registration No. 40,290				
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